CHILD DEVELOPMENT SERVICE (CDS) SPONSOR/PROGRAM AGREEMENT

For use of this form, see AR 608-10; the proponent agency is ODCSPER

AUTHORITY: Title 10, United States Code, Section 3013 PRINCIPAL PURPOSE: Information is used by DA personnel and patrons to: (11) Identify and clarify responsibilities of all parties involved in agreement, (2) specify commitment reparding acceptance and provision of CDS services. ROUTHE USES: Information provided may be released LAW the Army's blanket routine uses contained in AR 340-21. DISCLOSURE: Disclosure of requested information is voluntary; however, if information is not provided, individuals may not be able to participate in CDS programs. NAME OF SONSOR It.eut, first, Mill. PROGRAM VALID FROM (Month, day, year to month, day, year) SERVICE (Check appropriate box) FULL DAY PART DAY PRESCHOOL PART DAY SCHOOL AGE FCC HOME HOURLY AGE GROUP CATEGORY (Check appropriate box) INFANT TO PART DAY PRESCHOOL AGE SCHOOL AGE SCHOOL AGE Ingree to envoil my child/children In the CDS Facility/Family Child Care Home located at CDS Facility/Family Ch		DATA REQUIRED BY THE PRIVACY ACT OF 1974				
involved in agreement, (2) specify commitment regarding acceptance and provision of CDS services. ROUTINE USES: Information provided may be released IAW the Army's blanket routine uses contained in AR 340-21. DiscLOSURE: Discource of requested information is voluntary; however, if information is not provided, individuals may not be able to participate in CDS programs. NAME OF SPONSOR (Last, feet, MD) PROGRAM VALID FROM : Month, day, year to month, day, year or month, day, year	AUTHORITY:	Title 10, United States Code, Section 3013				
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*NON APPLICABLE FOR HOURLY SERVICES

FEES AND CHARGES (CDS Personnel)					
RATES FOR PROGRAM SERVICES ARE AS FOLLOWS:					
MISCELLANEOUS FEES FOR PROGRAM SERVIO	CES ARE AS FOLLOWS:				
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FEES WILL BE PAID IN THE FOLLOWING MANN					
FEES AND CHARGES ARE SUBJECT TO CHAN	GE. PATRONS WILL BE N	OTIFIED OF CHANGES 30 DAYS PRIOR TO FEE	ECTIVE DATE		
		(CDS Personnel)			
*CHILD MEDICATION WILL BE ADMINISTERED		<u> </u>	DITIONS		
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LAUNDERING CHILD'S/CHILDREN'S SOILED CL					
I WILL PROVIDE THE FOLLOWING TO MEET CDS PROGRAM REQUIREMENTS					
I ACKNOWLEDGE A SHARED RESPONSIBILITY WITH CDS FOR CHILD ABUSE PREVENTION					
I ACKNOWLEDGE AND CONSENT TO THE FOLLOWING CDS POLICIES CONCERNING THE CARE OF MY CHILD					
SIGNATURE OF SPONSOR			DATE		
SIGNATURE OF CDS REPRESENTATIVE OR FC	C PROVIDER		DATE		
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